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TO: U.S. Patent and Trademark Office  
Examiner: Tri M. Mai Group: 3727  
Fax #703-872-9306

FROM: James E. Cole, Reg. No. 50,530

DATE: February 4, 2004

PAGES: 11 in total (including cover sheet)

RE: U.S. Patent Application No. 09/876,336

Remarks: This facsimile is a response to the Office Action having a mailing date of November 4, 2003.

Enclosed is:

- (1) Transmittal Form;
- (2) Amendment D.

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR § 1.8

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PTO/SB/21 (08-03)


Approved for use through 08/30/2003. OMB 0851-0031

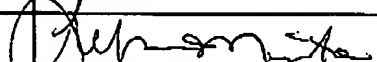
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/876,836
	Filing Date	08/07/2001
	First Named Inventor	LUKER
	Art Unit	3727
	Examiner Name	MAI
	Attorney Docket Number	CG-838
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FACSIMILE TRANSMITTAL FORM
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	JAMES E. COLE, Reg. No. 50,530
Signature	
Date	02/04/2004

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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	LYNN MINTON
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In re Application of :  
C. Edward Luker :  
:  
:  
Serial No.: 09/876,336 : Examiner: T. M. Mai  
:  
Filed: 6/07/01 : Art Group: 3727  
:  
For: Double Shell Closure with Support  
Ribs

**AMENDMENT D UNDER 37 CFR § 1.111**

Commissioner for Patents and Trademarks  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action dated November 4, 2003 reconsideration of the above referenced application is respectfully requested. Please amend the application as follows:

**Amendments to the Claims** begin on page 2 of this response.

**Remarks/Arguments** begin on page 7 of this response.